

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004161

FILED  
May 01, 2009  
Secretary of State

Entity Name: AMERIPRODUCTS INTERNATIONAL, INC.

**Current Principal Place of Business:**

521 MANDALAY AVENUE #403  
CLEARWATER, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**

521 MANDALAY AVENUE #403  
CLEARWATER, FL 33767

**New Mailing Address:**

FEI Number: 26-1370503

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE TULLO LAW FIRM  
2202 N. WESTSHORE BLVD., STE. 200  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: PALMER, BILLY C  
Address: 1148 RIVERSIDE RUN LANE, STE. A  
City-St-Zip: SUGAR HILL, GA 30518

Title: VCVP ( ) Delete  
Name: GRAVES, JEFFERY W  
Address: 3784 LOVELAND TERRACE  
City-St-Zip: ATLANTA, GA 30341

Title: STVP ( ) Delete  
Name: GRAVES, JEFFERY W  
Address: 3784 LOVELAND TERRACE  
City-St-Zip: ATLANTA, GA 30341

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFF GRAVES

MR.

05/01/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date